AGENDA
FOR
COUNCIL OF DEANS

ADMINISTRATIVE BOARD
THURSDAY, MARCH 20, 1980
9:00 a.m. – 12:30 p.m.
INDEPENDENCE ROOM
WASHINGTON HILTON HOTEL
WASHINGTON, D.C.
FUTURE MEETING DATES

COD Spring Meeting
Hilton Inn & Conference Center
Ft. Lauderdale, Florida-------------------April 9-12, 1980

COD Administrative Board
Executive Council-------------------June 25-26, 1980

COD Administrative Board
Executive Council-------------------September 24-25, 1980

AAMC Annual Meeting
Washington Hilton Hotel
COUNCIL OF DEANS
ADMINISTRATIVE BOARD
March 20, 1980
9:00 a.m. - 12:30 p.m.
Independence Room
Washington Hilton Hotel

AGENDA

I. Call to Order

II. Report of the Chairman

III. Approval of Minutes

IV. Action Items
   A. Election of Institutional Members
      (Executive Council Agenda) ...................(14)
   B. Proposed Plan for the Implementation of the Goals
      and Recommendations of the Report of the AAMC
      Task Force on Minority Student Opportunities in
      Medicine
      (Executive Council Agenda) ...................(22)
   C. Request for New and Developing Community Based
      Medical Schools Section Membership ............7

V. Discussion Items
   A. The LCME: Its Development and Current Status
      (Executive Council Agenda) ...................(39)
   B. Responding to State Legislative Initiatives
      Affecting Important AAMC Interests
      (Executive Council Agenda) ...................(70)
   C. Hospital Costs: Increased Competition Versus
      Mandatory Controls
      (Executive Council Agenda) ...................(75)
   D. Housestaff Meeting
      (Executive Council Agenda) ...................(108)
   E. Kennedy Health Manpower Bill
      (Executive Council Agenda) ...................(109)
F. The Stabilization of Research Grant Support
   (Executive Council Agenda) . . . . . . . . . . (118)

G. The Health Research Act of 1980 (H.R. 6522)
   (Executive Council Agenda) . . . . . . . . . . (121)

H. A Strategy for a Study of the General Education
   of the Physician
   (Executive Council Agenda) . . . . . . . . . . (124)

VI. Old Business

VII. New Business

VIII. Adjournment
I. Call to Order

The meeting was called to order at 9:10 am. Because of various visitors required to present reports at the meeting, there was some rearrangement of the schedule of the agenda. The minutes reflect this adjusted program.

II. Research Budget

Dr. Marguerite Hays, Assistant Chief Medical Director for Research and Development at the VA, appeared before the Board to discuss the current status of the VA Research budget. She explained that the funding for research and development, currently $123 million, has remained essentially constant--in 1970 dollars--since 1970. It is divided as follows: 70% into investigator initiated research plus 30% to health services centrally directed R & D programs which include career development, cooperative studies, research and rehabilitative engineering. With the budget being in a state of stagnation and competition for research and development funds getting stronger, it is becoming increasingly difficult for the VA to be responsive to the needs of affiliated hospitals and particularly to those associated with the new schools established with VA support.
III. Report of the Chairman

Dr. Bondurant gave a brief synopsis of several items beginning with a review of the topics covered during the AAMC Officers' Retreat. Copies of the Report of the Retreat were handed out to Board members.

Dr. Bondurant then addressed a concern expressed to him by members of the Society of Directors of Medical School Programs of Continuing Medical Education. That group, which Drs. Bondurant, Gronvall, and Sherman addressed at the Annual Meeting, feels insufficiently connected to the AAMC. After a discussion among Board members of their perspective on this issue, it was decided to request that the Executive Committee look into this matter.

From the Executive Committee meeting of that morning, Dr. Bondurant quickly summarized several items: membership on the 1980 AAMC Committees had been discussed and the appointments would be brought to the Executive Council for approval; potential speakers for the 1980 Annual Meeting had been identified; that two pieces of correspondence had been received by the Association which were of interest: the Association of Schools of Public Health had requested AAMC cooperation in their efforts to strengthen programs of preventive medicine in medical schools--the AAMC will respond expressing its willingness to be involved in such discussions; a letter from Phil Lee giving an extensive report on the health and nutrition of refugees in Southeast Asia (copies of this correspondence will be sent to all deans). Dr. Bondurant also announced the intention of the AAMC to expand the membership of the National Citizens Advisory Committee to include members nominated by COTH hospitals. The AAHC has expressed an interest in becoming more closely involved with teaching hospitals--the AAMC Executive Committee will seek a meeting with the AAHC Executive Committee to discuss this and other matters. It will offer to develop a liaison relationship between the COTH Board and the AAHC. The Executive Committee has approved continuing development of a proposed curriculum review study.

Finally, Dr. Bondurant proposed that the AAMC consider suggesting the nation's undergraduate medical education capability as a commodity on the international market both for reasons of social purpose and national policy. The Executive Committee responded positively and could identify no reasons why this idea should not be pursued.

IV. Approval of Minutes

The minutes of the September 13, 1979, meeting of the Administrative Board were approved as submitted.
V. Action Items

A. Medicare Reimbursement for Pathology Services

Dr. Bondurant reviewed the background of this issue as it appeared in the Executive Council Agenda. Board members had conflicting opinions regarding the recommendation and upon voting only three approved of it, with two nays, and one abstention.

B. Recommendations of the AAMC Concerning Medical School Acceptance Procedures

The Board agreed that timing is still an issue regarding non-refundable deposits but concluded that June 15 was an acceptable date.

**ACTION**

The Board approved the changes in Item 3 of the Recommendation of the AAMC Concerning Medical School Acceptance Procedures.

C. Report of the Ad Hoc Committee on Clinical Research Training

Board members were in agreement with a student suggestion that the discussions of the report make clear that "clinical research" under discussion is considered to be broadly defined and encompasses many areas of actual and potential student interest.

**ACTION**

The Board approved the recommendation that the Executive Council adopt the Report of the ad hoc Committee on Clinical Research Training and proceed to implement its recommendations.

D. Report of the Task Force on Graduate Medical Education

Dr. Swanson spoke to the Board explaining that the document had been revised after the discussion of the Assembly at the Annual Meeting. Basically, the introduction and conclusion were the only two new parts, although there had been some modification of the Financing Section to accommodate "the education versus service controversy." The OSR Board which had previously zeroed in on that part of the Financing Section felt the compromise was well done and had approved it.

**ACTION**

The Board approved the recommendation that the Executive Council accept the report.
E. Financing the Accreditation of Graduate Medical Education

The Coordinating Council on Medical Education recently endorsed a new policy statement on financing the accreditation of graduate medical education programs, ending the current method of financing.

ACTION

The Board approved the recommendation of the new policy.

F. Proposed Modifications of the Immigration & Nationality Act

There were three proposed changes in the Immigration and Nationality Act which were discussed by Board members. First, was the proposed extension of the training period which would permit individuals to finish their Boards. This change was approved and passed by the Board. Secondly, was the proposed extension of VQE waiver until December 31, 1984. After discussion among Board members, they voted to oppose the extension of the waiver, concluding that it would not contribute to the solution of the problems which stimulated the proposal. The third proposed change was that the NHSC obligation be fulfilled through participation in designated training programs. The Board voted to oppose this change.

G. Proposed Membership Criteria for Section of New and Developing Community Based Medical Schools

Because the administrators of clinical campuses of some medical schools continue to have an interest in the activities of this group, there has arisen confusion as to what does or should constitute membership in the Section of New and Developing Community Based Medical Schools. Thus after several discussions between Dr. Bondurant, as Chairman of the COD, and Dr. Beljan, as Chairman of the Section, a statement of criteria for membership in this section was proposed. It was endorsed by the Section at its November breakfast meeting.

ACTION

The Board approved the following criteria for membership in the Section:

Each Institutional and Provisional Institutional Member of the AAMC which declares itself or one of its components to have substantial interests in the activities of the Section on New and Developing Community Based Medical Schools will upon such self-designation become a member of the Section. In addition, other institutions may be elected to membership by action of the Administrative Board of the Council of Deans.
VI. Discussion Items

A. Coalition for Health Funding

Dr. Sherman joined the Board to provide the members with an update on the budget and appropriation process, explaining that the Coalition had been in existence for over eight years and consisted of 60 non-profit organizations interested in controllable health programs. The Coalition holds its own set of "budget hearings" as a means of forging a consensus on areas where increases over the President's budget are warranted. Through its exercise of self and member discipline, it has become a real force in the appropriations process. The President's budget in the health area this year was described as "hold-the-line"; the Coalition decided this was not the year to press for substantial increases.

B. The Controversy over Indirect Costs

The primary focus of this discussion centered on the resolution of the National Advisory Eye Council urging that steps be taken for NIH components to put a ceiling on indirect costs. General comments by Board members indicated that this was a significant issue for the AAMC to address but there was uncertainty as to the role the Association should play in educating the faculties. It was finally decided to recommend to the Executive Committee that a package dealing with all of the issues involved should be designed and made available.

C. Invitational Meeting on Graduate Medical Education Task Force Report

A conference will be held in Washington, D.C., in late September with invitations to be sent to those organizations which have participated in the preparation of this report. Dr. Swanson asked the Board for any additional suggestions as to who should be invited. Several were given: The Association of American Universities, an organization representing state commissioners of higher education, the Education Commission of the States.

D. LCGME

Dr. Cooper gave a brief background of the relationship between the LCGME and the AMA. The Board identified this as an important issue and suggested that it be put on the agenda of the Spring Meeting. In advance of that, there should be prepared a package of informational materials laying out the issues and developing the AAMC perspective on them.

E. 1981 COD Spring Meeting Site

The Board did not approve a 1981 site but members presented their views on some of the suggested locations. It was suggested more east coast sites be investigated.
F. National Health Insurance - A Position Paper

The Board concluded that this paper needed to go back to the full COD and that it should be added to the Spring Meeting Agenda.

G. Responding to State Legislative Initiatives Affecting Important AAMC Interests

Due to the constraint of time, there was a very brief discussion of this issue. Highlighted was the fact that the New York deans felt they had not been fully informed of the AAMC decision to litigate until it was too late to influence the decision. It was emphasized, however, that Dr. Cooper requested an opportunity to appear at the meeting of the New York deans only to be told the agenda was too full. Because this is such an important issue, it was decided to carry this over to the next Board meeting when the discussion could continue.

VII. Adjournment

The meeting was adjourned at 12:40 pm.
February 8, 1980

Marjorie P. Wilson, M.D.
Director
Department of Institutional Development
Association of American Medical Colleges
One Dupont Circle, N.W., Suite 200
Washington, D.C. 20036

Dear Marjorie:

I wrote to John Beljan asking how one would go about being included in the AAMC section on new and developing community based medical schools and he suggested I contact you with a formal request. I would like to have you consider this to be a formal request for inclusion in this body.

While we at the University of Wyoming are not a medical school in the true sense of the word, we have been designated by the Board of Trustees as a College of Human Medicine and supervise contracts for medical students under the WICHE program and through the University of Utah and Creighton University School of Medicine. We also supervise two family practice residency programs within the State at Casper and Cheyenne both of which are accredited. We are in the process of developing clerkships for students from several surrounding medical schools and are looking into many other facets of medical education and the health care delivery system within our State.

I felt that we benefited very much by being included, at John's invitation, at your breakfast meeting in November and I would like to continue this if it is all possible.

Thank you very much for any support that you can give to us. If there is anything we have to do in the way of formal application please do not hesitate to inform me.

Sincerely,

John J. Corbett, M.D.
Acting Dean